

• TOOLKIT FOR CHANGE •

#### A GUIDE FOR SCHOOLS



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#### About A Guide for Schools

This guide contains the latest information about methamphetamine (meth). Please print and distribute the guide to help your school's teachers, counselors, and administrators combat meth and support youth who are victimized by its devastation.

This guide is part of a larger toolkit, *Meth: Our Nation's Crisis*, a comprehensive CD/DVD. The CD offers 170 pages of printer-friendly material including a *Meth Primer, Campaign Resources*, *Meth Resource Directory*, and five action guides for community leaders, schools, parents, employers, and health care professionals. The DVD presents three meth-prevention videos—*Meth: Shadow Across America, Life After Meth*, and *Walking on Thin Ice*.

To order the  $Meth: Our\ Nation's\ Crisis\ CD/DVD\ (Order #2395), log\ on\ to\ www.hazelden.org/bookstore\ or\ call\ 800-328-9000\ for\ more\ information.$ 

#### **About Hazelden Publishing and Educational Services**

Hazelden Publishing and Educational Services is a division of the Hazelden Foundation, which pioneered the model of care for alcoholism and other drug addiction that is now the most widely used in the world. Today, with more than fifty years of experience and an unparalleled breadth of services, Hazelden is an international provider of treatment, research, education, training, and publishing. Visit www.hazelden.org for further information about Hazelden resources.

The Hazelden Foundation originally developed the following content in 2005 in conjunction with the Initiative Foundation (www.ifound.org). The material was subsequently revised and updated in 2006 for *Meth: Our Nation's Crisis*.

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# A GUIDE FOR SCHOOLS

### **Methamphetamine: A Growing Danger**

Methamphetamine (meth), a highly addictive synthetic stimulant, has sparked one of the most serious crises facing our nation's youth today. Young lives can be ruined, and families and communities devastated, by this drug's human and environmental costs. To address the meth issue, schools throughout the United States need to get involved.

# Use This Guide to Battle Meth in Your School

The purpose of this guide is to provide schoolteachers, counselors, and administrators with the information and tools they need to address the issue of meth use among youth and to support young people victimized by meth use within their families.

This guide's resources include

- specific examples of what's working in schools to address meth use
- ideas on how to teach young people to stay off drugs
- signs and symptoms of meth use
- tips for helping students who are using meth, or alcohol and other drugs
- guidelines on creating a drug-free school policy

- five 50-minute lesson plans for students of all ages
- "Tips for Teens: The Truth about Methamphetamine" fact sheet
- additional resources for educators

You may want to photocopy this guide and distribute it to other schoolteachers, counselors, and administrators. This guide is part of a larger educational CD/DVD toolkit, *Meth: Our Nation's Crisis*, designed for community leaders to own and share locally. The DVD includes *Walking on Thin* 



#### **EMERGENCY ACTION FOR METH OVERDOSE**

If you suspect a student may have overdosed on meth or another drug, call 911 and seek emergency treatment immediately. Then, if the student is conscious, ask what he or she took and try to get as much detailed information as possible, such as how much and how long ago. You may also want to search the area and the student for any possible clues about what substances were taken, such as drug paraphernalia, bottles of prescription drugs, or packets of illegal drugs. Share any details or evidence you discover with emergency medical personnel so that the student's medical care is based on as much information as possible.

Ice, a teen-oriented video that can be used in the lesson plan in this guide or shown separately. The *Meth Primer*, one of the printable resources on the CD, is also recommended for educators. Check with your school administrator or community methawareness group for these resources. The video is also available at the Hazelden Bookstore (www.hazelden.org/bookstore or 800-328-9000).

#### **Methamphetamine: A Danger to Youth**

Methamphetamine is a synthetic stimulant with a high potential for abuse and addiction. Immediately after taking the drug, users experience an intense, euphoric "rush," followed by eight to twelve hours of high-energy behavior, during which they may not eat or sleep. In general, meth users take the drug for the intense euphoria it offers. Some also take it to boost their immediate energy as they cope with multiple demands. Adolescents may start using meth as they work or study for long hours; they hear that it will increase their productivity. Young people, especially girls, may try meth for weight loss, and young men may try it to increase their sexual energy.

Meth can lead to irreversible brain damage, strokes, memory loss, psychotic behavior,

"If you saw meth on a kitchen counter often a dirty-looking crystalline powder you might mistake it for crumbs and just sweep it into the trash. Or you might kill for it. People on meth do crazy things."

— Dirk Johnson, Meth: The Home-Cooked Menace

heart damage, extreme anorexia, HIV transmission, cardiovascular collapse, and death. Meth users often develop ugly sores on their bodies from scratching at imaginary "crank bugs," and their teeth and gums often deteriorate because of an awful condition known as "meth mouth." Young people need to be told that meth is illegal, damaging, and addictive.

#### **Our Schools and Meth**

While alcohol and tobacco are ongoing problems in schools, and other drug trends come and go, many experts suggest that the meth problem may worsen because the drug is so accessible—it's often cheaper to buy than cocaine, and it can be made from household items. This is why a July 2005 report by the National Association of Counties called it our nation's most serious drug problem.<sup>1</sup>

How many students have tried meth? Among high school seniors in 2003, 6.2 percent had tried meth at least once, and 3.2 percent had used it that year, as had 3.3 percent of tenth-grade students, according to the National Institute on Drug Abuse (NIDA).<sup>2</sup> A 2005 Hazelden Foundation study found that meth addicts account for 9.5 percent of patients admitted to drug-treatment programs in the Minneapolis/Saint Paul area—up from 2.9 percent in 1998. Just over 18 percent of those receiving treatment for meth were seventeen years old or younger.<sup>3</sup>

A 2004 report showed that while teen meth use rates were generally dropping, the overall number of first-time users was still rising. In fact, between 2003 and 2004 first-time users rose from 260,000 to 318,000, with a mean age of twenty-two. Young adults eighteen to twenty-five had the highest rate of use. To combat this trend, consistent and ongoing school education about meth

is needed. As adolescents are exposed repeatedly to illegal drugs, they may grow callous to their dangers. In 2004 about half (51 percent) of American youth had tried an illicit drug by the time they finished high school.<sup>4</sup>

## Teens Who Try Meth Can Become Addicted

Many of the teens who are trying meth quickly become addicted—with all of the resulting consequences of addiction. Honor roll students flunk out of school, and teens with clean records start stealing from friends and family to fuel their meth addiction. Many teenagers think of meth as safer, longer lasting, and easier to buy than cocaine. It's not uncommon for fourteen- and fifteen-year-olds to be caught using and selling the drug.

#### My Students Are Smart— Why Would They Use Meth?

Meth contains, among many other things, anhydrous ammonia (a liquid fertilizer so corrosive it can burn the skin), red phosphorous (the chemical used in matches and road flares), iodine, battery acid, drain cleaner, and pseudoephedrine (an ingredient used in cold medication). So what would drive a young person to inhale or ingest this toxic substance?

"I started using meth because it made all the teenage stuff—talking to girls, trying to fit in, the rejection—easier. Once I was hooked, I didn't care about anything or anyone."

— A teen meth addict

Many teenage meth addicts say they started using meth because of low self-esteem or poor body image:

- "When taking meth I felt powerful, like I could walk through walls."
- "Meth made me feel skinny and attractive."
- "I felt in control."
- "I finally felt like I fit in."

Meth is a cheap, available, long-lasting high that gives users a sense of confidence and control. When young people first take it, they feel that they could study or party endlessly without getting tired or hungry. Teens who are sexually active may use meth because they have heard it heightens sexual desire.

Many girls who have never smoked a cigarette or tasted a beer are attracted to meth because they want to lose weight and are told by friends, "Just smoke this and you'll lose ten pounds in a weekend." In no time at all, they end up addicted and anorexic.

Ironically and tragically, young people use meth because they think it will make them more attractive, popular, and confident, but they soon discover it does just the opposite. Meth can emaciate and scar bodies, rot teeth, and cause brain damage, strokes, memory loss, and heart damage. It can induce paranoia and result in social isolation instead of the acceptance the users were seeking. Meth can make users angry and violent—and it can kill them.

# Ongoing Education Works to Keep Youth Off Drugs

Research shows that young people are less likely to use tobacco, alcohol, and other drugs if their parents set clear rules against it, but children have even better prospects for leading healthy, drug-free lives if schools support parents in their anti-drug message.

Studies have also shown that delaying the age of first alcohol or other drug use reduces the likelihood of developing substance abuse problems for a lifetime. Put another way, when it comes to alcohol and other drug experimentation and use, the earlier it starts, the worse it becomes. If a child is old enough to recognize words or images associated with alcohol and other drugs, the child is old enough to talk about the dangers of drug use.

Most chemical dependency specialists agree that just saying "no" to young people about drugs is not saying enough. The U.S. Department of Education notes that to be effective, drug education should be provided in an age-appropriate way at each grade level throughout the year rather than only once during a special week. There should be a parent education component, and the school's program should be based on current research.

#### **Children: The Innocent Victims**

Tragically, meth abuse does not just affect the user. Of particular concern is the growing number of young children being treated for exposure to meth lab toxins, or for injuries or trauma sustained because of an adult's dangerous meth addiction.

Endangered children are frequently found in filthy, toxic homes with parents who are consumed with the process of "cooking" meth and thus neglect their children. Children's play, sleep, and eating areas may be infested with rodents and insects. Rotten food, animal feces, used needles, and garbage piled on floors and counters are often found by law enforcement officers in homes used for producing meth.



# Do Your Students Know the Truth about Meth?

In November 2005, ABC News reported the story of a high school student from a small Minnesota town who took her first snort of meth when she was fifteen. She said that it was the most incredible experience of her life. It allowed her to stay up all night working on a math project. She said that the "Just say no" messages aimed at teens don't always work.<sup>5</sup>



#### Myth:

Many teens think of meth as safer, longer lasting, and easier to buy than cocaine.

#### Truth:

Meth is made from products
like battery acid, drain cleaner,
lye, antifreeze, and other toxins.
Users can suffer heart
attacks, strokes, or serious
brain damage.

First responders say they can never fully prepare themselves for the shock of finding young children who haven't eaten, bathed, or been loved by a sober parent in days or weeks. They describe finding malnourished, frightened, and neglected children with respiratory problems, liver damage, injuries, or other problems. Initially, the children must be held with rubber gloves because their skin and clothing are extremely toxic.

#### How many children are endangered by meth labs?

In fiscal year 2003, more than 3,400 children were directly affected by the manufacture of meth; 44 were reported injured and 3 children were killed in lab-related incidents. Since 2000, more than 15,000 children in the United States have been affected by meth labs and related incidents.

Being around meth endangers children in many ways. In meth lab raids in 2003, nearly 1,300 incidents involved a child exposed to toxic chemicals.<sup>6</sup> You don't have to be a meth user to absorb its toxins—living near its production or inhaling its smoke will also cause it to enter a person's bloodstream. And because children have smaller bodies and higher rates of metabolism and respiration than adults, they absorb higher levels of the toxic meth-lab chemicals.

#### **Learn to Identify At-Risk Children**

Teachers are often the first to identify at-risk children, so they should know the physical and behavioral signs exhibited by children who live at or visit a meth site. Children with symptoms consistent with meth exposure or ingestion must have an emergency

"I fell in love with it [meth] the very first time
I used it. It took away all of the awkwardness
and self-doubt of adolescence and instantly
made me feel like I was invincible."

 Jim Atkins, Director of Admissions, Hazelden, and former meth user



#### The High Cost to Children

In 2003, a baby in Catoosa, Georgia, died from burns he received when the meth lab where he lived exploded.

The baby's parents were making meth in their garage apartment. When the fire broke out, the parents escaped and then realized they had forgotten their baby.

By the time the baby was rescued, he had burns on over 30 percent of his body. His parents fled the area before the baby's funeral and burial and were later arrested buying more chemicals to make meth. medical evaluation as soon as possible. Children found in these settings may also be at risk for various types of abuse or neglect, which should be addressed in a medical as well as social services evaluation.

Children living in a meth house may appear hungry, unkempt, paranoid, sad, or angry. They are often less prepared and have fewer social readiness skills, lower self-esteem and more aggressive behaviors, and more health and dental needs than their fellow students.

# Children exposed to meth labs may display the following symptoms:

- red and itchy eyes
- chronic cough
- skin rashes/burns
- chronic respiratory problems
- reliance on an inhaler
- body odor that smells of chemicals
- clothes that smell like cat urine

Teachers should be familiar with the policies and procedures of their school district and state. Report suspicions to the appropriate administrator or staff for follow-up.

"For children living with parents on meth, going hungry is just part of the bargain . . . In some cases, no one is in charge, except perhaps an older sibling, and kids are left to fend for themselves."

— Dirk Johnson, Meth: The Home-Cooked Menace

## **Alcohol and Other Drug Prevention Programs Work**

In 2005, the Substance Abuse and Mental Health Services Administration (SAMHSA) reported that the vast majority of youth are receiving alcohol and other drug prevention messages from sources such as TV, radio, posters, and pamphlets.

A special 2004 report of the National Survey on Drug Use and Health (NSDUH) also showed that those who have been exposed to such messages are significantly less likely to abuse drugs.<sup>7</sup>

#### **Take Action: Partner with Parents**

Well-informed and engaged parents who work in tandem with teachers reinforce the anti-drug messages being delivered in the classroom. Classroom prevention activities should have a family component where children and parents (or adult caregivers) can work together on activities that stimulate healthy discussion and reinforce drug prevention.

Two parent resources, the *Guide for Parents* and the *Meth Primer*, are contained on the CD in the *Meth: Our Nation's Crisis* toolkit package, and can be printed and reproduced free of charge. The toolkit's meth-education videos are also highly recommended for parents. If you need a copy of this CD/DVD toolkit, check with your school administrator or community's meth-awareness initiative.

# A Five-Session Meth Lesson Plan for Students

(Allow 40 to 50 Minutes for Each Session)

The goal of these lessons is to ignite curiosity, build on students' knowledge base, and relate the lessons to their lives to help them make healthy, well-informed choices about meth use. These lessons are geared to students in grades six through twelve, with a suggested alternative activity for younger students.

#### Lesson 1

#### **Meth and Its Consequences**

1. **Option A:** Show the class the *Walking on Thin Ice* video, one of the three on the DVD in the *Meth: Our Nation's Crisis* toolkit. If you need a copy, check with your community meth initiative or order it (also available as a single video) through

Hazelden Publishing and Educational Services at 800-328-9000.

- 2. **Option B:** Print the one-page flyer "Tips for Teens: The Truth about Methamphetamine," found at the end of this guide, and distribute it to students. It can be customized by adding your school logo and contact information.
- 3. Break the class into groups of three or four students. Assign a recorder and a reporter for each group. Have each group develop a list of consequences for using meth, with the recorder writing it down. Reconvene the class after the small-group discussion and have each reporter share his or her group's list. Review the following consequences to make sure they are covered:

# Possible Health Consequences of Using Meth

- insomnia
- irreversible brain damage
- strokes
- memory loss
- psychotic behavior
- heart damage
- extreme anorexia
- HIV transmission from needles or unsafe sex
- cardiovascular collapse
- ugly sores from scratching at imaginary "crank bugs"
- deterioration of teeth and gums
- paranoia
- hyperthermia (elevated body temperature) and convulsions
- death

# Possible Behavioral Consequences of Using Meth

- declining performance at school, work, or home
- damaged relationships with family and friends
- stealing and borrowing money from work, home, or friends
- secretive, defensive behavior about activities and possessions
- unusual mood changes
- abrupt temper outbursts
- switching to a different peer group
- deterioration in personal appearance and hygiene
- loss of interest in usual activities, pastimes, and hobbies
- harm to the whole family

# Possible Legal Consequences of Using Meth

- jail, detention center, or "boot camp"
- expulsion from school
- mandatory drug treatment

## Possible Consequences of "Cooking" Meth

- chemicals used to make meth can damage the central nervous system, liver, and kidneys, and burn or irritate the skin, eyes, nose, and throat
- every pound of "finished product" produces about six pounds of dangerous waste that contaminates surrounding buildings, groundwater, wells, land, and air
- cleanup of a meth lab typically costs between \$3,500 to \$5,000, but some cleanups cost as much as \$20,000

- children found at meth labs are often malnourished, frightened, and neglected, with respiratory problems, liver damage, injuries, or other problems from exposure to their parents' toxic drug and lifestyle
- explosive ingredients used to make meth also put children and neighbors at risk for chemical burns and respiratory damage from fires
- 4. Extend the learning at home by having teens find newspaper articles about meth and bring them in to discuss.
- 5. For younger students: Ask students to generate words for their feelings and thoughts about people who use illegal drugs. Write all their ideas on a chalkboard or flipchart.

#### Lesson 2

#### Why Do People Use Drugs?

- 1. In small groups, have students discuss why they think young people use alcohol, illegal drugs, and meth in particular. Have the groups report on their reasons. Specifically address the reasons why teens use meth (weight loss, low self-esteem, peer pressure, more energy).
- 2. Assign to each group one of the main reasons why young people use drugs, and have each group generate ideas for ways to address that factor without using drugs.

For example: What are some healthy ways to lose weight? What are some healthy ways to deal with boredom? Have students report their ideas to the larger group.

- 3. Extend the learning at home by having students interview their parents or guardians about their perceptions of meth (or other illegal drugs) and why young people try it.
- 4. For younger students: Talk about some of the reasons why young people use illegal drugs—and why these reasons aren't good ones. Then have the children write a letter to a friend telling them why he or she shouldn't use illegal drugs. (They do not need to send the letter.)

#### Lesson 3

#### Don't Believe the Media Hype

- 1. Focus this lesson on what the media—particularly magazine ads, TV commercials, billboards, and movies—tell consumers about using chemicals. Discuss the subtle messages we are given and whether students think these messages are valid. Also discuss what the media tell us about the importance of being thin and full of energy. Display magazine ads or play commercials if it will help stimulate this conversation.
- 2. Challenge the messages by asking students what they would say in an ad to tell other teens the truth about substance use. Have them create written ads to convey these messages.
- 3. Extend the learning at home by having students find and bring in newspaper or magazine ads that fuel the unhealthy messages they are given.
- 4. For younger students: Create a rap song or act out a TV commercial with a no-drug-use message. Write the script yourself if your students are too young to come up with an idea on their own.



#### **Students Teach Meth Education**

To educate others about the drug's dangers, students at a Bend, Oregon, middle school created methawareness posters for a communityservice and peer-mentoring class. The posters included startling pictures of long-term meth addicts. To create the posters, the students also researched meth, watched the news, and learned "scary" details, like "body temperatures in meth users can reach 107 degrees." The students also created an attentiongetting slogan, "Meth rhymes with death, think about it." Other students have reported that they are less likely to use any drug based on what they learned in the class. These students plan to hang more posters in the local community to inform a larger audience about the meth crisis.

#### Lesson 4

#### **Don't Fold under Pressure**

1. Talk about how teens may get pressured into using meth or other drugs. Discuss healthy ways to resist pressure to use.

#### Possible strategies:

- · Say "no thanks" and walk away.
- Say "no" and suggest another positive, healthy activity instead.
- Give an excuse such as "My parents would ground me until I graduate."
- Choose not to go to places where there will be alcohol or other drugs or be with people who will pressure you to use.
- If possible, make a plan with your parents: if you are in a situation where people are using, you can call your parents and they will pick you up.
- If people are using, tell them that you are suddenly not feeling well and need to go home.
- 2. Role-play situations where teens are being encouraged or pressured to use meth.
  - *Example:* A friend offers you some meth and says it will give you energy and help you lose weight. "Everyone is using it!" What do you say?
  - *Example:* Your older brother offers to take you to a party where people will be using meth. He says it's a great drug. What do you say?
- 3. Discuss possible solutions to these roleplays.

- 4. Extend the learning by having students discuss peer pressure with their parents or adult caregivers. Have them develop strategies to avoid or get out of a pressure situation without embarrassment.
  - Examples: Use parents' rules as an excuse not to use drugs; arrange ahead of time to have an adult available in case you need a ride or need to leave a threatening situation.
- 5. For younger students: Discuss scenarios together or write out a script for children to follow in a role-play. Practice the role-play as a group.

#### Lesson 5

#### **Telling Others the Truth**

- 1. Review all the major concepts that students have learned.
- 2. Challenge teens to create posters or other educational pieces to teach younger students about meth. A possible starter question: What would you say to younger students so they stay off meth?
- Talk about how teens can be agents of change in their schools and communities.
- 4. Talk about what teens should do if they think a friend is on meth or is living in a meth lab home. (Whom should they talk to? Is it okay to tell?)
- 5. Extend the learning by having students think of ways their class could work with parents and community leaders to organize a Meth-Awareness Walk from the school to a public building.

6. For younger children: Have the children create posters that illustrate one thing they learned in these lessons about illegal drug use, particularly meth use.

# How to Help a Young Person with an Alcohol or Other Drug Problem: General Tips for Guidance Counselors, School Nurses, and Administrators

Communication, however difficult, is the first step in addressing a substance abuse problem and getting help for an addicted person. Carol L. Falkowski, Hazelden's director of research communications and author of *Dangerous Drugs: An Easy-to-Use Reference for Parents and Professionals*, offers these tips for confronting students about drug use:

- Don't confront a student about his or her use while the student is high or drunk. Wait until later when the effects of the drug have completely abated.
- Expect to be put on the defensive. Someone with a substance abuse problem will vehemently deny having one. The student may lash out at *you* and try to convince you that only *you* have a problem.
- State your motivation—that you are having the conversation, however difficult, because you care about the student and what happens to him or her.
- Be firm in your presentation. Persist in trying to make the student realize that the situation is out of control. Come prepared with specific examples of out-of-control behavior.
- Present your observations of the student's behavior. Focus on what you see happening to the person and the lives of those around him or her. Be very specific.
- Express how the student's behavior makes you feel. Articulate your feelings clearly.



# **CLIMB Theater Educates Youth** on Dangers of Meth

CLIMB is an educational touring children's theater that performs plays and drama classes in schools throughout the country. Their 2006 play It Will Never Happen to Me features a popular high school student, who, in one moment, makes a choice to try meth. The theater's 35- to 45-minute productions are supported by activity workbooks for teachers and a parent letter. Supplementary products like posters, CDs, books, and videos that reinforce each play's messages may be purchased. Immediately after a performance, the actors can visit classrooms for a 20-minute interactive class.

For more information, call 800-767-9660 or log on to www.climb.org.

- State why you think the student needs help in stopping the addiction. Many other people have recovered from addiction and gone on to lead successful lives. Getting well and staying well often requires the help of others.
- State what you will do next. This could include contacting proper authorities, notifying parents, and assisting the student in getting help.<sup>8</sup>

Involve parents in this process as much as possible. If you are unable or unwilling to openly discuss the issue with the user, you can call on addiction treatment professionals who can assist and advise you. No matter how impossible a situation may appear, appropriate help from a qualified professional is available.

#### If You Suspect Meth Use, Respond Quickly

If school personnel observe the illegal distribution, possession, sale, transportation, or manufacture of controlled and dangerous substances on school property, local law enforcement should be contacted immediately for assistance. These situations usually result in a uniformed officer responding to conduct an investigation, make an arrest (if appropriate), and prepare a report.

Drug enforcement strategies should be well thought out and planned ahead. Consistent, detailed documentation must be kept in case criminal prosecution results from the behavior.

To investigate a potential alcohol or other drug crisis situation, be prepared to answer the following questions:

- 1. What exactly did you see?
- 2. Does illegal activity, policy violation, or very unusual behavior appear to be taking place?
- 3. Is a group of students involved, or a single student?
- 4. Are reliable witnesses available?

#### **Discussion Note for Teachers**

# **Teach Students to Focus on Internal Sources of Self-Worth**

A 2002 study conducted at the University of Michigan found that college students who based their self-worth on external sources. such as appearance, approval from others, and academic performance, have higher-than-normal levels of stress, anger, academic problems, relationship conflicts, alcohol and other drug use, and symptoms of eating disorders. However, students who based their self-worth on internal sources, such as being a virtuous person or adhering to moral standards, were found to receive higher grades and were less likely to use alcohol and other drugs or to develop eating disorders. These findings apply to younger students as well.9

#### Signs and Symptoms of Meth Use

If you suspect a young person is using meth, enlist the help of the student's parents to locate a professional who can conduct a chemical dependency assessment. Possible resources include a school counselor, county social services agency, or reputable treatment facility. Know your school's policies and procedures, and report your suspicions to the appropriate administrator or staff for follow-up.

These symptoms can indicate meth use:

- loss of appetite—extreme, rapid weight loss
- high energy level or restlessness
- talkativeness
- sores on skin from scratching at "crank bugs"
- insomnia
- paranoia
- dry mouth
- dilated pupils
- distorted auditory and visual perceptions
- repetitive motor activity
- declining performance at school, work, or home
- damaged relationships
- stealing or borrowing money from work, home, or friends
- secretive, defensive behavior about activities and possessions
- unusual mood changes
- abrupt temper outbursts
- switching to a different peer group
- deterioration in personal appearance and hygiene
- loss of interest in usual activities, pastimes, and hobbies 10

- 5. Is any physical danger involved in taking action or not taking action?
- 6. Do any existing policies apply to the situation?
- 7. Does the situation require expert consultation from the guidance department, security, or law enforcement?
- 8. Have you documented what you saw and did in response?

#### Create a Drug-Free Workplace/ Drug-Free School Policy

A written drug-free policy is an essential component of an effective prevention program. Keep in mind that such a policy is not just about drug testing. Sample policies can be found through a variety of sources, but before you adapt an existing one, make sure it fits the laws and regulations of your state and school district. A borrowed policy may not contain everything you need.

Use the sample policy found in appendix B at the end of this guide as a template to create your own.

# Hazelden Resources and Materials

The Hazelden Store offers curricula, books, videos, and other products on recovery, treatment, criminal justice, and prevention. The titles listed below can boost your anti-meth efforts by engaging students to take a stand against all types of youth substance abuse.

Log on to www.hazelden.org/bookstore or call 800-328-9000 for more information.

#### **CURRICULA**

#### Project Northland (Order #0681)

Class Action Curriculum (Order #0682)

Now with a high-school component, this research-based CSAP Model Program for preventing alcohol use was originally developed for sixth, seventh, and eighth graders. While alcohol is the focus of the curriculum, it has also been proven to reduce marijuana and tobacco use. Published 2002.

### Alternate Routes AN ALCOHOL DIVERSION PROGRAM

Order #0967

A prevention and early intervention tool for youth twelve to eighteen, this curriculum examines the negative consequences of alcohol use, including legal, social, physical, and economic aspects. It can also be adapted to reduce meth and other drug use. Published 2002.

Communication is the first step in addressing a substance abuse problem and getting help for an addicted person.

#### CounterAct Alcohol, Drugs, and Violence

Order #5580

This prevention program teaches nine- to twelve-year-olds the facts of substance use. Students learn how to resist pressure to use, make positive health choices, and avoid violence. For use by educators, law enforcement officers, and community organizations. Published 1995.

### On the Verge BOOSTING YOUR PREVENTION EFFORTS

Order #2068

This curriculum focuses on attitudes and everyday pressures young teens face with regard to risky behaviors: smoking, using alcohol and other drugs, and violence. Peerled activities and engaging articles and exercises get young people thinking about four critical areas in their lives: friendship and peer pressure, group influences and expectations, advertising and the media, and role models and goals. Use as a supplement to D.A.R.E. to achieve positive outcomes. Published 2003.

#### **BOOKS AND PAMPHLETS**

#### Helping Your Chemically Dependent Teenager Recover A GUIDE FOR PARENTS AND OTHER CONCERNED ADULTS

by Peter Cohen, M.D. Center City, MN: Hazelden, 1991 • Order #3178

This book empowers parents to help their teen recover, and to find their own personal relief from the pain of a child's chemical dependence.

# How to Stop Enabling and Start Empowering Kids

Johnson Institute, 1997

This booklet in the Parenting for Prevention Information Series helps readers understand parental enabling and its hurtful effects. It offers tips on identifying common parental behaviors that lead to enabling, and guidance on how to empower children instead.

#### **Meth: The Home-Cooked Menace**

by Dirk Johnson

Center City, MN: Hazelden, 2005 • Order #7794

With staggering facts and up-to-the-minute information, this award-winning journalist has written the definitive book about America's methamphetamine pandemic. Johnson examines the unprecedented physical, mental, social, and environmental destruction caused by meth use and production.

#### **VIDEOS**

# Parenting for Prevention HOW TO HELP KIDS BE SENSIBLE, SAFE, AND SECURE

Order #3195

This six-video series teaches powerful skills parents, teachers, and caregivers can use to help kids make secure decisions—and be safe from alcohol, other drugs, and violence. Topics include enforcing consequences, confrontation and encouragement, handling anger, enabling versus empowering, setting limits, and conflict resolution.

Comes with a facilitator's guide on CD (Mac and Windows versions), class-by-class notes, reproducible handouts, and booklets for parents. VHS, 12 to 15 minutes each, 1998.

#### Methamphetamine—Deciding to Live

Order #5667

This powerful video in Hazelden's Drugs of Addiction Video Series details both the devastating consequences of meth addiction and the struggles and rewards of recovery. Facts, medical aspects, personal stories, and insights on the recovery process illuminate the path to healing. VHS, 38 minutes, 1998.

### Walking on Thin Ice A METHAMPHETAMINE PREVENTION VIDEO

Order #4065

This teen-oriented video offers straight facts about meth from the perspectives of teens who are recovering from meth addiction, and police and a paramedic whose true stories reveal the ravages of the drug. Viewers learn about meth; its negative effects on the body, brain, and behavior; and its side effects. This video also covers refusal skills—advice given to teens directly from their peers. Included in the *Meth: Our Nation's Crisis* toolkit on DVD; also available separately on VHS. 21 minutes, 1999.

"Remember, the end of meth will not come from experts. It will come from organized communities who have had enough."

— Kathy Gaalswyk, President, Initiative Foundation

#### **Web Resources for Schools**

These sites offer ideas for meth education for treatment and recovery, as well as youth-oriented resources.

#### **METH EDUCATION**

#### **American Council for Drug Education**

www.acde.org

This site's fact sheet on meth gives a brief history of methamphetamine and lists the consequences of use. Also includes a drug quiz for youth, advice for parents for discussing substance abuse with their children, a list of symptoms of drug use, and other general information about drugs.

#### **Faces of Meth**

www.facesofmeth.us/main.htm 503-988-5551

This site features photographs of people before and after meth use, with downloadable images and a poster for educational use.

#### **Just Think Twice**

www.justthinktwice.com

In the style of a teen magazine, this Drug Enforcement Administration site has a section on meth with information about its forms and street names, the consequences of use (including pictures of the damage done to people's bodies), and stories about young users.

#### **Meth Education for Elementary Schools**

www.cstl.semo.edu/coned/Medfels/medfels.htm 573-651-2541

MEDFELS was developed to educate thirdand fourth-grade teachers and students, but it can be useful to other teachers, parents, and concerned citizens. In addition to detailed information about meth production, use, addiction, prevention, and treatment, this site offers interactive learning games for children.

### National Alliance for Drug Endangered Children

www.nationaldec.org/news/news.htm

Meth-related articles from many news sources discuss children endangered by meth, its effect on a person's appearance, mothers who use the drug, and meth arrests. Contact information is listed by state, and there are links to DEC alliances.

#### **National Youth Anti-Drug Media Campaign**

www.mediacampaign.org

800-666-3332 (Drug Policy Information Clearinghouse)

This site provides information on media campaigns that target substance use, and features downloadable anti-drug banner, print, radio, and television ads.

## NIDA (National Institute on Drug Abuse) for Teens

www.teens.drugabuse.gov 800-729-6686

This site engages fifth- through ninth-graders with facts on the science of drug abuse, including meth facts, a quiz, glossary, "Ask Dr. NIDA" and "Dr. NIDA's Challenge," "NIDA Libs," the interactive game "Sara's Quest," and the "Mind over Matter" series described below.

## NIDA (National Institute on Drug Abuse) "Mind over Matter" Educational Series

www.teens.drugabuse.gov/mom/index.asp

This series encourages fifth-through ninthgraders to learn about the biological effects of drugs including methamphetamine, marijuana, opiates, stimulants, inhalants, hallucinogens, anabolic steroids, and nicotine. A printable PDF version of the teacher's guide is available.

#### **Parents: The Anti-Drug**

www.theantidrug.com

800-729-6686 (SAMHSA's National Clearinghouse for Alcohol and Drug Information)

Parents will find tips on communicating the dangers of drugs to their children and a link to subscribe to a monthly newsletter.

#### Partnership for a Drug-Free America

www.drugfree.org/Portal/drug\_guide/ Methamphetamine 212-922-1560

The long- and short-term effects of meth use, before-and-after pictures, and former users' stories are featured on this site. Youth can test their knowledge with a meth quiz and a visit to the "Truth versus Reality" section.

### U.S. Department of Health and Human Services and SAMHSA

www.ncadi.samhsa.gov/govpubs/PHD861 800-729-6686

A "Tips for Teens" section discusses the signs of meth use and provides information about how it affects one's body.

#### www.streetdrugs.org

763-473-0646

This self-titled site contains articles on meth labs and the associated cleanup costs, as well as child endangerment. Photos and videos of meth can be viewed, and brochures and posters are available for purchase. The site has separate sections for youth and parents/educators.

#### TREATMENT/RECOVERY

#### **Alateen**

www.alateen.org 888-425-2666

Alateen is a recovery group for teenagers affected by others' alcoholism or use of other drugs. This site offers an online searchable directory of Alateen meetings in the United States and Canada.

#### **Crystal Meth Anonymous**

www.crystalmeth.org 213-488-4455 (hotline)

This site lists CMA meetings across the United States. It provides information on the Twelve Steps and how to start a CMA meeting.

#### CrystalRecovery.com

www.crystalrecovery.com

Fast facts and photos, teen stories about meth, a question-and-answer board, and several community bulletin boards all support recovery for those with meth addiction.

#### **Hazelden Foundation**

www.hazelden.org 800-257-7810

Hazelden pioneered the model of care for alcoholism and other drug addiction that is now the most widely used in the world. Today, with more than fifty years of experience and an unparalleled breadth of services, Hazelden is an international provider of treatment, research, education, training, and publishing. Its site offers a variety of resources for parents and schools, including tips for discussing alcohol and drugs with young people, the signs of use, and information about Hazelden's Center for Youth and Families.

#### **Matrix Institute on Addictions**

www.matrixinstitute.org 800-310-7700

This site discusses *The Matrix Model*, an evidence-based program for treating alcohol and drug addictions, offers related articles, and lists presentation and training dates. Maps show the various Matrix Institute offices and treatment centers.

#### **Methamphetamine Treatment Project**

www.methamphetamine.org/mtcc.htm

**UCLA Integrated Substance Abuse Programs (ISAP)** 310-312-0500

#### **Matrix Institute on Addictions**

800-310-7700

The site provides general information about the drug, discusses *The Matrix Model* treatment program, and offers links to news reports and a list of meth treatment centers.

#### **National Youth Anti-Drug Media Campaign**

www.mediacampaign.org 800-666-3332

This site provides information on media campaigns that target substance use and offers downloadable anti-drug banner, print, radio, and television ads.

#### APPENDIX A

Type on your letterhead. Adapt for use in newsletters, brochures, flyers, press packets, etc.

#### **Tips for Teens: The Truth about Methamphetamine**

In its various forms, meth has many names, including "speed," "crystal," "crank," "tweak," "go-fast," "ice," "glass," "uppers," and "black beauties."

- Meth affects your brain. In the short term, meth causes mind and mood changes such as anxiety, euphoria, and depression. Long-term effects can include chronic fatigue, paranoid or delusional thinking, and psychological damage.
- **Meth affects your body.** Over-"amping" on any type of speed is risky. Creating a false sense of energy, these drugs push the body faster and further than it's meant to go. It increases heart rate, blood pressure, and risk of stroke.
- **Meth affects your self-control.** Meth is a powerfully addictive drug that can cause aggression and violent or psychotic behavior.
- Meth can kill you. An overdose can result in heart failure. Long-term physical effects such as liver, kidney, and lung damage may also kill you. In 2001, meth use sent more people to the emergency room than use of any other club drug. Over half of these cases involved meth in combination with another drug, such as alcohol, heroin, or cocaine.
- Not everyone is using meth. Think all your friends use meth? You might be wrong. In 2003, only 3.2 percent of twelfth graders reported having used it.

#### How can you tell if a friend is using meth?

It may not be easy to tell. But signs of use may include:

- inability to sleep
- increased sensitivity to noise
- nervous physical activity, like scratching
- irritability, dizziness, or confusion
- extreme anorexia
- tremors or even convulsions

- increased heart rate
- presence of items used for inhaling (such as razor blades, mirrors, and straws), or for injecting (such as syringes, heated spoons, or surgical tubing)

These tips are from the National Clearinghouse for Alcohol and Drug Information (NCADI), which offers free, valuable information on drug use and prevention that parents and others can share with young people. Contact NCADI at 800-729-6686 or at www.health.org.

#### APPENDIX B

#### Sample Drug-Free Workplace/Drug-Free School Policy

#### I. PURPOSE

The purpose of this policy is to maintain a safe and healthful environment for employees and students by prohibiting the use of alcohol, toxic substances, and controlled substances without a physician prescription.

#### II. GENERAL STATEMENT OF POLICY

- A. Use of controlled substances, toxic substances, and alcohol before, during, or after school hours, at school or in any other school location, is prohibited as general policy. Paraphernalia associated with controlled substances is prohibited.
- B. It shall be a violation of this policy for any student, teacher, administrator, other school district personnel, or member of the public to use alcohol, toxic substances, or controlled substances in any school location.
- C. The school district will act to enforce this policy and to discipline or take appropriate action against any student, teacher, administrator, school personnel, or member of the public who violates this policy.
- D. Random canine searches may be used to determine if any violation of this policy has occurred. Both students and staff are subject to such searches in any school location.

#### III. DEFINITIONS

- A. "Alcohol" includes any alcoholic beverage, malt beverage, fortified wine, or other intoxicating liquor.
- B. "Controlled substances" include narcotic drugs, hallucinogenic drugs, amphetamines, barbiturates, marijuana, anabolic steroids, or any other controlled substance as defined in Schedules I through V of the Controlled Substances Act, 21 U.S.C. § 812, including analogues and look-alike drugs.
- C. "Toxic substances" include glue, cement, aerosol paint, or other substances used or possessed with the intent of inducing intoxication or excitement of the central nervous system.
- D. "Use" includes to sell, buy, manufacture, distribute, dispense, possess, use, or be under the influence of alcohol and/or controlled substances, whether or not for the purpose of receiving remuneration or consideration.

- E. "Possess" means to have on one's person, in one's effects, or in an area subject to one's control.
- F. "School district location" includes any school building or on any school premises; in any school-owned vehicle or in any other school-approved vehicle used to transport students to and from school or school activities; off school property at any school-sponsored or school-approved activity, event, or function, such as a field trip or athletic event, where students are under the jurisdiction of the school district; or during any period of time an employee is supervising students on behalf of the school district or otherwise engaged in school district business.

#### IV. EXCEPTIONS

- A. It shall not be a violation of this policy for a person to bring onto a school location, for such person's own use, a controlled substance that has a currently accepted medical use in treatment in the United States and the person has a physician prescription for the substance. The person shall comply with the relevant procedures of this policy.
- B. It shall not be a violation of this policy for a person to possess an alcoholic beverage in a school location when the possession is within the exceptions of Minn. Stat. § 624.701, Subd. 1a (experiments in laboratories or pursuant to a temporary license under Minn. Stat. § 340A.404, Subd. 10 and § 340A.403, Subd. 2).

#### V. PROCEDURES

- A. Students who have a prescription from a physician for medical treatment with a controlled substance must provide a copy of the prescription and the medication to the school nurse, principal, or other designated staff member. The school district's licensed school nurse, trained health assistant, principal, teacher, or other designated staff member will administer the prescribed medication in accordance with school district procedures.
- B. Employees who have a prescription from a physician for medical treatment with a controlled substance are permitted to possess such a controlled substance and associated necessary paraphernalia, such as an inhaler or syringe. The employee must inform his or her supervisor. The employee may be required to provide a copy of the prescription.
- C. Employees are subject to the school district's drug and alcohol testing policies and procedures.

- D. Each employee shall be provided with written notice of this Drug-Free Workplace/Drug-Free School policy and shall be required to acknowledge that he or she has received the policy.
- E. Members of the public are not permitted to possess controlled substances in a school location except with the express permission of the superintendent.
- F. Possession of alcohol on school grounds pursuant to the exceptions of Minn. Stat. § 624.701, Subd. 1a, shall be by permission of the school board only. The applicant for permission shall apply in writing and shall follow the school board procedures for placing an item on the agenda.

#### VI. ENFORCEMENT

#### A. Students

- 1. A student who violates the terms of this policy shall be subject to discipline in accordance with the school district's discipline policy. Such discipline may include suspension or expulsion from school.
- 2. The student may be referred to a drug or alcohol assistance or rehabilitation program and/or to law enforcement officials where appropriate.

#### B. Employees

- 1. An employee who violates the terms of this policy is subject to disciplinary action, including nonrenewal, suspension, termination, or discharge as deemed appropriate by the school board.
- 2. In addition, any employee who violates the terms of this policy may be required to satisfactorily participate in a drug and/or alcohol abuse assistance or rehabilitation program approved by the school district. Any employee who fails to satisfactorily participate in and complete such a program is subject to nonrenewal, suspension, or termination as deemed appropriate by the school board.
- 3. As a condition of employment in any federal grant, each employee who is engaged either directly or indirectly in performance of a federal grant shall abide by the terms of this policy and shall notify his or her supervisor in writing of his or her conviction of any criminal drug statute for a violation occurring in any of the places listed above on which work on a school district federal grant is performed, no later than five (5) calendar days after such conviction.

4. Sanctions against employees, including nonrenewal, suspension, termination, or discharge, shall be pursuant to and in accordance with applicable statutory authority, collective bargaining agreements, and school district policies.

#### C. The Public

A member of the public who violates this policy shall be informed of the policy and asked to leave. If necessary, law enforcement officials will be notified and asked to provide an escort.

#### ADOPTED BY THE BOARD OF EDUCATION: (DATE)

I have received a copy of the Drug-Free Workplace/Drug-Free School Policy of (NAME OF SCHOOL)

Dated:	
Signature of Employee/Applicant:	
Printed name of Employee/Applicant: _	

#### **Notes**

- 1. National Association of Counties, "The Meth Epidemic in America," survey report available at www.naco.org. The surveys were conducted by Research, Inc., of Washington, D.C. "The Criminal Effect of Meth on Communities" survey included results from 500 counties in 45 states, and "The Impact of Meth on Children" was based on results from 303 counties in all 13 states where child welfare activities are performed at the county level.
- 2. National Institute on Drug Abuse, Monitoring the Future: National Results on Adolescent Drug Use 2004, available at www.monitoringthefuture.org.
- 3. Hazelden Foundation, "Methamphetamine-Related Treatment Admissions Increase in Metro Area," Jan. 18, 2005, available at www.hazelden.org/servlet/hazelden/cms/ptt/hazl\_7030\_shade.html?sf=t&sh=t&page\_id=29555.
- 4. National Institute on Drug Abuse, Monitoring the Future 2004, and Substance Abuse and Mental Health Services Administration, Results from the 2004 National Survey on Drug Use and Health: National Findings, DHHS Publication No. SMA 05-4062, NSDUH Series H-28 (Rockville, MD: SAMHSA, 2005).

In the NIDA study, the rate of general teen use includes lifetime and past-year use. The SAMHSA survey defines first-time users as people twelve or older who used meth for the first time during the twelve months before the date of the study interview.

- 5. ABC News report, "Portrait of a Young Meth Addict: Teen Talks about Spiraling into Drug Addiction and Recovery," Nov. 2, 2005.
- 6. Office of National Drug Control Policy, "Drug Endangered Children," 2003 data reported to El Paso Intelligence Center and cited under "Prevalence" at www.whitehousedrugpolicy.gov/enforce/dr\_endangered \_child.html.
- 7. Substance Abuse and Mental Health Services Administration, *Results from the 2004 National Survey.*
- 8. Adapted from Carol L. Falkowski, *Dangerous Drugs: An Easy-to-Use Reference for Parents and Professionals*, 2nd ed. (Center City, MN: Hazelden, 2003), pp. 75–76.
- 9. Jennifer Crocker, "The Costs of Seeking Self-Esteem," *Journal of Social Issues* 58, no. 3 (2002).
- 10. National Institute on Drug Abuse sources and Falkowski, *Dangerous Drugs*.